

NCDA&CS, VETERINARY DIVISION ANIMAL WELFARE SECTION 1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030 PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR POUTDOOR DOTH D

ANIMAL WELFARE INSPECTION

| | ANIMAL WELFARE INSPECT | TON |
|--|---|---|
| GPS Coordinates - | - N: 35 44970 W: | 80.45597 |
| BUSINESS NAME: OWNER: ADDRESS: TELEPHONE: (704) 797 - VMO HUNTER COUNTY KOWAN | | SACISBURY |
| | spector: Mark "X" in each box, if adequal Circle each item number, if ina Use NA if not applicable | uate. |
| STRUCTURE | SANITATION | SPECIAL ITEMS |
| Housing Facilities 1. Structure & Repair 2. Ventilation & Temp. 3. Lighting 4. Ceiling, Wall, Floors 5. Storage 6. Water Drainage | № 11. Waste Disposal № 12. Odor № 13. Ceiling, Wall, Floors № 14. Primary Enclosures № 15. Equipment & Supplies № 16. Washrooms, Sinks, Basin № 17. Insect/Vermin Control № 18. Building & Grounds | Records 24. Description of Animals 25. Records/Vet Treatment 26. Origin/Disposition Signature (boarding kennel) Written permission from owner for commingling (doggie daycare) |
| Primary Enclosures 7. Structure & Repair 8. Space 9. Ventilation & Temp. 10. Adequate Shelter | HUSBANDRY 19. Adequate Feed/Water 20. Food Storage 21. Personnel Ratio of 1:10 personnel to animals if >4 in primary enclosure or common are 23. Animals' Appearance | |
| APPROVED CONDI | TIONALLY APPROVED DISAPPROV | Date: 9:22 Time: 10:09 They Owner/Authorized Agent's Signature |

AW-2 Rev. 1/07

White= Office

Canary= Inspector

Pink= Owner

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

| LICENSE #: 20 | 410 | | |
|---------------------|--------------------------|---|------------------------------------|
| TYPE FACILITY | Y: Animal Shelter (Priva | te/Public) 🗆 Boarding Kei | nnel 🗆 Pet Shop ধ Public Auction 🗆 |
| BUSINESS NAM | IE: A16 | LAND AND SE | A |
| OWNER: | - | | |
| ADDRESS: | | Col | VT |
| TELEPHONE: (| | | VT |
| Item Number | Explanation | of Inadequacy (circled items | s above) And Date Corrections |
| (BS) | An Trime | CS TO TREAT | To Tors |
| | INC LIVITIES | CS 18 1/2171 | MENIS |
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| TAPPROVED | conditional | LY APPROVED DISA | PPROVED Date: 9/22/08 Time: 10:04 |
| | Inspector's Signature | | Owner/Authorized Agent's Signature |
| AW-2 Rev. 1/07 | White= Office | Canary= Inspector | Pink= Owner |

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